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STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES

Med-QUEST Division Clinical Standards Office P. O. Box 700190 Kapolei, Hawaii 96709-0190

July 6, 2020

MEMORANDUM

MEMO NO. CTR-2002

TO:

Federally Qualified Health Centers (FQHC)

FROM:

Judy Mohr Peterson, PhD

Med-QUEST Division Administrator

SUBJECT: REVISED DENTAL CLAIM PROCEDURE - LISTING OF PROCEDURES PERFORMED

The Med-QUEST Division (MQD) is issuing this memorandum to inform FQHC dental providers of future changes that will occur when filing Prospective Payment System (PPS) dental claims. These changes are tentatively anticipated to take effect September 1, 2020.

PPS reimbursement currently requires that FQHCs and Rural Health Centers (RHCs) submit procedure code D9999 on all dental claims for beneficiaries below age 21 preventive/restorative benefits. For adult emergency dental services, procedure code D0140 and ICD-10 diagnosis code K08.9 are used on claims.

Forthcoming changes will require that in addition to D9999 and D0140/K08.9, all claims from FQHCs submitted for PPS reimbursement must also include the D-codes of all eligible dental services provided at the encounter. All services provided must continue to comply with all clinical, submission, and frequency limitation requirements as described in Medicaid Provider Manual Chapter 14 to be eligible for PPS reimbursement.

Examples of a properly completed claim are shown on page 2.

	24. Procedure Date (MM/DD/YYYY)	25. Area of Oral Cavity	26. Tooth System	27. Tooth Number(s) or Letter(s)	28. Tooth Surface	29. Procedure Code	29a. Diag Pointer	29b. Qty	30. Description	31.	Fee
L	01/30/2020		JP			D9999			FQHC - Child	\$20	0.00
2	01/30/2020		JP	19		D2954			Prefab Post	\$	0.00
}	01/30/2020		JP	19		D3330			RCT - Molar	\$	0.00
ļ	01/30/2020		JP	18	0	D2140			Amal 1 surf	\$	0.00
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;											
			•	•	,				31a. Other Fees		
									32. Total Fee	\$20	0.00

24. Procedure Date (MM/DD/YYYY	25. Area of Oral Cavity	26. Tooth System	27. Tooth Number(s) or Letter(s	28. Tooth Surface	29. Procedure Code	29a. Diag Pointer	29b. Qty	30. Description	31.	. Fee
01/30/2020		JP			D0140			FQHC - Adult	\$2	00.00
01/30/2020		JP			D0140			Limited Exam	\$	0.00
01/30/2020		JP	19		D0220			Intraoral PA	\$	0.00
01/30/2020		JP	19		D7210			Surgical TE	\$	0.00
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								31a. Other Fees		
									-	
							32. Total Fee \$20		00.00	

Line 1 of the "Record of Service Provided" section of the ADA claim form must be used for either D9999 or D0140 and linked to the PPS rate. All other D-codes should be subsequently listed and linked to a fee of \$0.00.

FQHCs are being asked to make the necessary preparations in advance of the implementation date. Any questions, please contact Dan Fujii, DDS, MQD Dental Consultant, at dfujii@dhs.hawaii.gov.